



Senedd Cymru | Equality, Local Government and Communities Committee

**Inquiry into COVID-19 and its impact on matters relating to the Equality,
Local Government and Communities Committee's remit**

A response from Cymorth Cymru

1 July 2020

1. Introduction

1.1 Cymorth Cymru welcomes the opportunity to contribute to the Committee's inquiry. We have focused on the impact of COVID-19 on the homelessness, housing and support sector.

1.2 Our members have faced unprecedented challenges over the past few months, making significant changes in order to respond effectively and continue to deliver safe, high quality services to thousands of people across Wales. In this response we will outline the key challenges, the response from government and its partners, and our views about the future.

1.3 The importance of home

1.3.1 This pandemic has highlighted the importance of the 'home' in providing safety, stability and security to people during this period. It has also exposed the stark inequalities facing people who do not have a home to call their own, those who are living in unsuitable or precarious accommodation, and people who experience violence and abuse in their home.

1.3.2 What do we mean by a good home?

- **Accessible** to disabled people and adapted for independent living
- **Affordable** rent or mortgage payments and running costs
- **Connected** physically, socially and digitally with access to services, support and outside space
- **Culturally adequate**
- **Good condition** inside and out
- **Safe from harm and abuse** in the home and surrounding neighbourhood
- **Secure and stable**
- **Sufficient space** and well designed

1.3.3 Having somewhere to live that encompasses all these elements is fundamental to personal dignity, individual wellbeing and, as the recent crisis has demonstrated, maintaining public health. Moving over 800 people into emergency accommodation, for instance, and providing them with a secure and safe environment in which to live has been essential in lowering community transmission of COVID-19. However, it has also highlighted some of the shortcomings of our current system. It is imperative that we learn from this experience and reduce the housing inequalities faced by people in Wales, so that we are better equipped to face future pandemics.

1.3.4 As we look towards the future, we strongly advocate for measures to ensure that everyone has a good quality home and the support they need, as this will be a foundational element in tackling not only COVID-19, but also ending homelessness for good.

2. Impact and key challenges

2.1 Impact on people experiencing homelessness and VAWDASV

2.1.1 As described above, COVID-19 has highlighted the importance of having a safe and secure home in which people are able to practice social distancing, have access to adequate hygiene facilities and can self-isolate from other people, thereby preventing the spread of the virus. Unfortunately, many people did not have access to these basic requirements at the start of the pandemic and were therefore much more exposed to the risk of COVID-19.

2.1.2 **People sleeping rough:** This has been hardest felt by those sleeping rough, as aside from lacking the protection that a home affords, they are also more likely to have underlying health

conditions – including respiratory illnesses¹, placing them at a higher risk of falling seriously ill with COVID-19 than the general population.

- 2.1.3 **Emergency and other forms of shared accommodation:** COVID-19 has demonstrated that some types of emergency accommodation such as floor space and shared rooms are not adequate due to people's inability to practice social distancing and self-isolation. Communal washing and food preparation areas have also posed challenges to people's ability to maintain hygiene practices and avoid transmission.
- 2.1.4 **Hidden Homelessness:** Many people who were living in precarious housing situations, such as 'sofa surfing' have had to present to homelessness services during this pandemic. This has exposed the difficulties facing many people who were previously hidden from sight and weren't captured in homelessness statistics. This has particularly affected younger people who are more likely to have been in precarious accommodation prior to outbreak of the virus².
- 2.1.5 **Victims of violence against women, domestic abuse and sexual violence (VAWDASV):** Home has been presented as a place of safety during this pandemic, with politicians urging us to stay safe by staying at home. However, for too many people their home is associated with abuse and violence. Evidence from Welsh Women's Aid suggested that perpetrators have utilised lockdown restrictions to increase coercive and controlling behaviour. People experiencing domestic abuse have been in lockdown for three months, spending twenty four hours a day with their abuser, unable to escape or call for help. In addition, people have had less interaction with health, education and other public services, which could have identified them as at risk of abuse.

2.2 Impact on the homelessness, housing and support sector

- 2.2.1 **Staffing levels:** COVID-19 has impacted staffing levels, with some staff members having to self-isolate with COVID-19 symptoms and others being in the shielding category. This has led to staff shortages in some services and required local authorities and providers to redeploy staff and/or use agency staff as cover. The introduction of the Test Trace Protect system has also led to concerns about whether increased numbers of staff will need to self-isolate, should someone living or working within the accommodation project test positive.
- 2.2.2 **Personal Protective Equipment (PPE):** The virus had a huge impact on access to, and availability of, PPE and hygiene products. At the onset of the outbreak access to supply varied greatly across Wales as the sector struggled to meet this new demand. In the early stages of this pandemic a number of local authorities did not receive the stock they had anticipated, and this had a knock-on effect on the ability of support providers to access it. Most had to source stock themselves to top up what, if any, was provided through central local authority stocks. They also faced difficulties in balancing the urgency to procure PPE with concerns about whether supplies were safe and of good quality, as most support providers do not have PPE procurement expertise. There were also issues with security of supply, with delivery dates being delayed, or even cancelled, in some instances. This was sometimes due to stock being re-allocated to the NHS in England. There was also initial confusion regarding how and when PPE should be used, as the official four-nation government guidance was focused on health and social care settings. Support providers wanted to ensure that people using and delivering services were safe from transmission, but did not want to divert stock from the NHS if it was not necessary.

¹ <https://www.gov.uk/government/publications/health-matters-rough-sleeping/health-matters-rough-sleeping>, this study covers England only but is reinforced by Cymorth Cymru's Health Matters report in Wales

(https://www.cymorthcymru.org.uk/files/5115/1791/4790/Cymorth_Cymru_Health_Matters_report.pdf)

² <https://www.bbc.co.uk/news/uk-wales-52561650>

- 2.2.3 **Testing:** Getting staff tested from across the homelessness, housing and support sector has been difficult during this pandemic. There has been an inconsistent response across Wales, with confusion about the process that needs to be followed, and the priority of different sectors. We are not disputing the effort put in, or the progress made, but it has been a significant source of concern for our members. Testing has been viewed as vital in reducing the need for unnecessary self-isolation and therefore staff shortages in services.
- 2.2.4 **Move to digital methods of support:** Due to the stringent lockdown rules, our members have had to transform their delivery models in order to ensure that people could continue to receive support. While some services, such as supported accommodation and outreach, have maintained an element of face-to-face delivery, many have moved to virtual and phone support. This had placed strain on providers' existing digital infrastructure, but they adapted quickly and have continued to deliver vital support services. The longer term impacts of this type of support are not yet known, but we know that providers have had concerns about barriers to digital inclusion for people using services, and particularly those on low incomes who can't afford access to tech and devices. Providers have worked very flexibly to overcome or address these challenges, but there are concerns about the extent to which people using services are able to build trusting relationships and share their more pressing issues and worries over a telephone or video call, rather than face-to-face.
- 2.2.5 **Increase in referrals:** Many providers told us that they have seen an increase in referrals since the outbreak. This is due to a variety of reasons, including the precarious nature of the job market, relationships and housing status. Understandably, the pandemic has been a very stressful time for many households, with family or relationship breakdown being one of the consequences. Some local authorities have noted an increase in presentations from young people and Llamau have told us that there has been a 50% increase in calls to their youth homelessness helpline since the lockdown period. Family breakdown and the unsustainable nature of sofa surfing during the pandemic are thought to be key factors.
- 2.2.6 **Mental health and wellbeing (people using services):** COVID-19 has had a significant impact on people's mental health and wellbeing. Many people using homelessness, housing and support services have been living in unsuitable accommodation and face many other challenges such as mental health problems, domestic abuse and/or addiction issues. The outbreak of COVID-19 is an additional stress to everyone, but for many of the people our members support, this is an added stress on top of the traumas they have already experienced. Isolation, boredom and frustration are also having a significant impact on people's wellbeing. Many have found it hard to access mental health services due to the service capacity issues and the increased demand as a result of COVID-19.
- 2.2.7 **Mental health and wellbeing (staff):** Lots of staff have had to deal with the added pressures of short-staffing and redeployment to other services. Many are still delivering face-to-face services and having to manage the health risks and anxieties associated with this. Some are dealing with extremely challenging circumstances in emergency accommodation, as hundreds of people have brought in off the streets and housed in new environments, living under COVID-19 restrictions and trying to cope with trauma, mental health problems and addiction. Staff who are working from home are having to cope with feelings of isolation due to a lack of social contact and support networks. They continue to experience secondary trauma through the support work they deliver, but do not have the benefit of being able to go back to the office and talk things through with colleagues.
- 2.2.8 **Communication of COVID-19 restrictions:** Some providers noted that people using their services had experienced difficulty in understanding the COVID-19 guidelines and how they applied in Wales, particularly when the UK Government diverged from the policies of the

other nations. Wales is heavily reliant on the London-based media for its news, and their failure to communicate the differences in policy across the UK has not helped.

- 2.2.9 **Challenges within accommodation:** While lots of people have managed to adapt to COVID-19 restrictions, it has proved difficult for many. Service providers have faced huge challenges with encouraging people to understand and comply with social distancing and self-isolation guidelines. There have also been instances of anti-social behaviour, particularly in emergency accommodation, with some examples of criminal activity. It is widely recognised that some of the issues are related to people's experiences of trauma, mental health problems and/or addiction issues, and services have tried to take a compassionate and trauma informed approach. However, it has been an extremely challenging time for providers of accommodation and support as they have tried to keep everyone safe and well.
- 2.2.10 **Availability of accommodation:** The changes to the interpretation of the legislation regarding priority need and vulnerability during this crisis has been welcome, as nobody should be left without housing during a pandemic – and we cannot turn our backs on people afterwards. However, we do recognise that there have been implications for local authorities as higher numbers of people have qualified for the legal duties, particularly in a system where housing is scarce. As the pandemic has progressed, and people continue to present to homelessness departments, the lack of accommodation has been a significant cause for concern. This underlines the importance of providing enough social housing to meet the needs of people in Wales.
- 2.2.11 **VAWDASV:** There has been an increase in the number of reported VAWDASV incidences since the implementation of the Government lockdown on March 23rd. Data from the UK level shows an increase a 25% increase in calls and online request for help³. In Wales, Welsh Women's Aid have reported that despite an initial drop in calls, the Live Fear Free helpline has seen a 49% increase in calls, with these calls usually increasing in complexity with case studies showing that call times are now doubling since the lockdown.
- 2.2.12 **Learning Disability issues:** COVID-19 has also affected the Learning Disability and supported living sector. Whilst the issues are largely part of health and social care remit, there are significant crossovers into the Equalities, Local Government and Communities Committee's remit. Key issues facing our members in this area have been the challenge of having PPE guidance that is relevant to their setting, of accessing supplies of PPE in a timely and reliable manner, and particular issues around changes to rules around exercise, hospital visiting and support worker accompaniment. These have all been addressed by Welsh Government quickly, but it did underline a situation where guidance seemed to be geared towards domiciliary care or residential care, and not supported living settings.
- 2.2.13 **Additional costs:** The crisis has resulted in a significant increase in expenditure for support providers due to the procurement of PPE, additional staffing costs, essential items for people using services, and investment in information technology to facilitate remote working. One of our third sector members expected additional costs of at least £165K during the first three months of the pandemic, to cover expenditure such as PPE and cleaning supplies, emergency food supplies, resources for people using their services and technology to enable home working.
- 2.2.14 **Loss of income:** Organisations have also lost fundraising revenue as events had to be cancelled due to the outbreak, an income stream which many have used to subsidise their services due to the decreased levels of public funding over the recent years. The organisation referenced above also expects to lose £300K in budgeted income due to the cancellation of fundraising events and decreased community fundraising. Another issue

³ <https://www.bbc.co.uk/news/uk-52157620>

raised by organisations providing refuge and other forms of supported accommodation is the impact of voids on their finances. Where people are shielding or having to self-isolate in shared accommodation, providers have deliberately left some rooms empty in order to reduce the risks of transmission. However, this has resulted in the loss of housing benefit, which is a critical element of the scheme's financial sustainability.

- 2.2.15 **Longer term financial sustainability:** Many organisations have reached into their reserves to cover initial costs, and have been unsure as to whether these can be recouped. As COVID-19 will likely be a public health problem for the foreseeable future, providers have had to factor in assumptions around social distancing and PPE use into their long term financial planning. The impact of additional expenditure and loss of income during this pandemic is likely to have an impact on organisations' reserves, and therefore their financial resilience and sustainability, in the medium to long term.

3. Response

3.1 Welsh Government

- 3.1.1 **Initial response:** Cymorth raised concerns with senior Welsh Government officials about the potential impact of COVID-19 at the end of February. They asked us to collate a number of scenarios which would highlight the challenges and risks posed to particular groups of people and services. Following this, a meeting of housing and health officials and third sector stakeholders was convened to develop the first piece of COVID-19 guidance for homelessness and substance misuse services in Wales. This also led to the development of 'phase one' of the Welsh Government's response to homelessness during the pandemic. We were pleased with the responsive and collaborative nature of officials' response and this set the tone for their approach throughout the first three months of the pandemic.
- 3.1.2 **Coordination and collaboration:** Since the start of the pandemic Cymorth Cymru has been invited to weekly COVID -19 strategic coordination meetings with the Welsh Government's Housing Directorate, Social Services Directorate and the VAWDASV team. These have enabled officials to keep stakeholders up-to-date on the latest Welsh Government activity and priorities, as well as giving us a space to raise key or emerging issues and challenges facing our members. This collaborative approach has been extremely positive for stakeholders working across these policy areas and has resulted in better communication and coordination between Government and the sector. We have been able to raise issues facing our members throughout this pandemic and have received fairly rapid answers and actions in response to them.
- 3.1.3 **Coproduction of written guidance:** In addition, Welsh Government housing officials have been extremely collaborative in the development of official guidance, often doing so in response to issues raised by us and other stakeholders. We have been involved in the development of guidance on a range of issues, often involved from the beginning of the process. During a period when there has not been time for the usual consultation processes, officials have been extremely collaborative and taken on board our views and challenge.
- 3.1.4 **£10million to provide housing and support:** Cymorth very much welcomed the Welsh Government's £10m fund to provide emergency accommodation⁴ and support for people who were sleeping rough or in unsuitable accommodation. The initial £10m was in contrast to the £3.5m announced by the UK Government for England and made a statement about the Welsh Government's commitment to getting people off the streets and into a safe place.

⁴ <https://gov.wales/10-million-emergency-support-rough-sleepers-wales-during-coronavirus-outbreak>

- 3.1.5 We know that housing alone will not solve homelessness and we were really pleased to see the emphasis on providing both housing *and* support with this funding. In addition, it was extremely positive to see the emphasis on *appropriate* accommodation which included self-contained rooms with access to personal bathrooms and hygiene facilities, where possible. We were also very pleased to see the commitment to providing housing and support for people with no recourse to public funds, as they are often excluded from being able to access the services they need.
- 3.1.6 The Welsh Government made this funding available in a flexible and timely way for services during this crisis. This flexibility has allowed services to provide essential support and items, such as personal cooking appliances, cleaning products, digital equipment and subscriptions, and other essential items which have helped sustain people in their accommodation throughout this period. Welsh Government have placed trust in local authorities and services to make the right decisions for the people they support, whilst also providing them with the requisite funds in an open and flexible way, which has been very much welcomed by the sector.
- 3.1.7 As a result, over 800 people have been housed in emergency accommodation and been provided with health care and support. Many have started to receive treatment for addiction and some people have been supported to move on to more permanent accommodation. The response is something that Wales can be extremely proud of.
- 3.1.8 **Sourcing accommodation:** Access to accommodation has varied in different local authority areas, with some looking for additional support to secure additional places for people presenting to homelessness departments. The Welsh Government has provided assistance by having strategic conversations with hotels and then passing details onto local authorities to secure the accommodation as part of their COVID-19 response. Officials have also worked with the National Residential Landlords Association and Rent Smart Wales to put out a call for private rented properties. They have facilitated the registration of private rented sector properties, which should help to increase the availability of emergency and longer term housing available to local authorities.
- 3.1.9 **Removal of legal barriers:** The decision by the Minister for Housing and Local Government to write to local authorities about the interpretation of priority need and vulnerability⁵ was an extremely positive step in removing barriers to access to housing and support. However, this also exposed the need to increase the provision of truly affordable housing to ensure that local authorities have the resources to provide people with the accommodation they need.
- 3.1.10 **Phase Two response to homelessness:** We also welcome the announcement on the 28th May regarding an additional £20m and the plan for phase two of Wales' response to homelessness during the COVID-19 pandemic. It is absolutely essential that the people in emergency accommodation are helped into more permanent accommodation and we support the Welsh Government's ambition to transform homelessness services with a focus on rapid re-housing. This reflects the Homelessness Action Group's major report from March 2020⁶ about how the Welsh Government should end homelessness in Wales. Our Director was a member of this group and we support the plans to enact its recommendations. Although government and the sector has been focused on the crisis response, it is important that this report is not forgotten as we move to recovery and the 'new normal'.
- 3.1.11 **£40million for social care:** The Welsh Government's announcement to provide £40m in additional funding for adult social care to cover additional costs as a result of COVID-19, was another positive response. We are currently in the process of working with Welsh

⁵ https://gov.wales/sites/default/files/publications/2020-04/guidance-for-local-authorities-in-supporting-people-sleeping-rough-covid-19_0.pdf

⁶ <https://gov.wales/homelessness-action-group-report-march-2020>

Government alongside CHC, Care Forum Wales and others on how this funding can be allocated in the most appropriate manner, including ensuring providers can access funding quickly when necessary. By the end of June, there remain providers within supported living who have not received any money from this fund. While we understand the need to ensure good governance and appropriate use of public money, it is vital that this funding reaches the frontline services as soon as possible, to compensate for the significant additional expenditure experienced during the initial phases (and ongoing phases) of the pandemic. It is disappointing that it has taken until the end of May for any providers of supported living to begin receiving payment through this fund (with some still waiting), for expenses incurred from March onwards. We should add, that in response to this, Welsh Government Social Care officials have invited provider and local government representatives to a working group, to establish guidance for any future tranche of funding for social care, to ensure expedited payment.

- 3.1.12 **Third Sector funding:** The announcement that £24m would be made available to third sector organisations⁷ was welcomed. The funds will help third sector organisations in the housing, homelessness and support sector deal with cash flow problems and to pay bills during a period when physical fundraising and others sources of revenue have decreased. However, there continue to be concerns about ongoing costs once this fund ceases to exist.
- 3.1.13 **£500 payment for social care staff:** The decision to provide a £500 bonus for care sector staff, including our members in the supported living sector was welcome. However, many of the people working in the homelessness, housing and support sector do not qualify for this payment, despite their continued work to provide face-to-face support to people through outreach services, supported housing and emergency accommodation during this pandemic.

3.2 Homelessness, housing and support sector

- 3.2.1 **Critical workers:** We would like to take this opportunity to recognise the extraordinary efforts of homelessness, housing and support staff during this crisis. Throughout this period staff have continued to provide face-to-face services, putting themselves and their families at risk in order to help others. As this crisis has demonstrated, workers from these sectors are vital for the health of society as a whole.
- 3.2.2 Our members' employees have helped to house people who were sleeping rough in appropriate accommodation, thereby protecting them and the wider public from possible transmission of the virus. They have worked hard to help people in supported accommodation, refuges, hostels and other settings to stay safe and well. Supported living staff have helped people with learning disabilities live happy, safe and fulfilled lives – whilst following public health guidance. The collaboration between providers and government and the collective efforts of both parts of our membership have played an important part in reducing the spread of COVID-19. This has been an incredibly challenging period and it should not be underestimated how difficult has been for local authorities and their partners. It is important to appreciate the work of local authority, housing and support provider staff during this pandemic and we urge all Members of the Senedd to publicly recognise their efforts and achievements.
- 3.2.3 **Urgency of response:** The pace at which the sector had to respond was extremely challenging, particularly as very little was known about the virus at the beginning of the pandemic. It was unclear what extra resources would be available to tackle this pandemic, but all partners acted quickly to safeguard the health and wellbeing of people using homelessness, housing and support services in Wales.

⁷ <https://gov.wales/welsh-government-boosts-support-valued-charities-and-third-sector-organisations-wales>

- 3.2.4 **Emergency accommodation:** Many local authorities moved quickly to ensure that people who were sleeping rough or in unsuitable accommodation were provided with accommodation and support to protect them from the virus. To have provided over 800 people with emergency accommodation and support is an extraordinary achievement and credit to the commitment and innovative thinking of local authorities and their partners. There have been different approaches in different local authority areas, including block booking large hotels, utilising bed and breakfasts, and securing holiday accommodation. Cardiff City Council, for example, have taken over two hotels and are operating them as supported accommodation with 24-hour staffing on site, ensuring experienced support staff were present alongside less experienced staff deployed from elsewhere.
- 3.2.5 **Local coordination and collaboration:** Some local authorities took a proactive approach by starting weekly COVID-19 coordination meetings prior to official guidance being published. These involved third sector partners who in turn shared their respective crisis response plans in order to enhance knowledge and practice across the sector. The Centralised Coordination Cells, set up in line with Welsh Government guidance, have been key to coordinating the response and being able to respond appropriately to local needs. Local authorities and providers have welcomed the involvement of other public services, such as health and the police, as this has supported the sharing of information and a multi-disciplinary response to emerging issues.
- 3.2.6 **Multi-disciplinary collaboration:** There have been some very good examples of multi-disciplinary working across Wales, particularly with substance misuse services. Cardiff City Council has an established Multi-Disciplinary Homelessness Team⁸ and has built on this to ensure that the large number of people housed in emergency accommodation have had access to health care and support, including dedicated mental health and substance misuse support workers. This has led to a number of people engaging in treatment services for addiction and starting to deal with experiences of trauma and some of the underlying issues that contributed to them becoming homeless.
- 3.2.7 **Crisis planning and adapting service delivery:** Due to the stringent lockdown guidelines and the anticipated impact of the virus on staffing levels, it became clear that services would need to adapt substantially in order to meet people's support needs during the crisis. Our members started crisis planning before lockdown began, prioritising services, identifying people delivering and using services who were at particular risk to the impact of the virus, training staff in alternative services, setting up clear lines of communication, considering adaptations to accommodation and setting up digital infrastructure to enable virtual support services. A significant amount of work took place in the first few days and weeks, but support providers responded rapidly and always put people using services at the heart of their plans.
- 3.2.8 **Encouraging compliance with lockdown:** Many providers have adapted their services in response to the challenges of COVID-19 and helping to encourage people to comply with social distancing and self-isolation measures, as we have outlined in our practice report⁹. Local Authorities have been open to these changes and have played a key role in facilitating them. These changes include:
- **Practical changes** to services and new protocols, including changes to physical space and developing cleaning and hygiene protocols.
 - Ensuring people have **access to essential items and support**, such as food supplies and cooking equipment, financial support, healthcare and pharmacy support.
 - **Keeping people active and engaged** including physical activity, mindfulness, art materials and activities to alleviate boredom.

⁸ https://www.cardiff.gov.uk/ENG/resident/Housing/rough-sleeping/what-we-are-doing/Pages/default.aspx#anchor_2

⁹ https://www.cymorthcymru.org.uk/files/5715/9033/0280/COVID-19_practice_-_lockdown_guidance_-_Eng.pdf

- **Helping people to stay connected** by purchasing equipment such as internet hubs, mobile phones and other communication devices and supporting digital engagement by creating dedicated social media groups/channels for people using services
- **Regular check ins**, with support providers offering weekly or sometimes daily wellbeing phone calls, and developing befriending call services for those experiencing isolation.

3.2.9 **PPE supply:** One of the biggest challenges facing the sector was the availability and cost of PPE for the homelessness, housing and support sector. As a result, Cymorth worked with the Welsh Government and Community Housing Cymru (CHC) to secure a weekly supply of 2000 litres of hand sanitiser from Swansea University for the homelessness, housing and support sector. For the past few months this has been delivered to four regional distribution hubs, each hosted by a housing association, where individual organisations have been able to pick up their supply.

3.2.10 Following on from this success, we again worked with CHC and Care and Repair Cymru to secure supplies of Fluid Resistant Face Masks for our members. The procurement process was led by CHC, Linc Cymru and Pobl Group and resulted in over 300,000 masks being delivered to the sector during May and June. The same organisations have also led a procurement process to secure a longer term supply of masks for CHC, Cymorth and Care and Repair members. This supply line will start in July and a range of organisations, including housing, homelessness, VAWDASV and substance misuse support providers will benefit from the price and security of this arrangement.

3.2.11 **PPE Advisory Note:** The four-nation PPE guidance was aimed at health and social care services, and was therefore difficult for our members to interpret and apply within their services. We called for additional guidance and worked with Public Health Wales to inform their Advisory Note for housing, health, social care and support settings¹⁰. This has been incredibly helpful and enabled the sector to understand how much PPE they needed, and in what circumstances it is necessary.

3.2.12 **Housing First:** During this crisis the Housing First model has continued to help people who would normally be at highest risk of health issues and / or repeated homelessness, safe and well. We have been humbled by the levels of dedication shown by Housing First providers across Wales. In Conwy / Denbighshire, the outreach team continues working with people sleeping rough, whilst using PPE to manage the risk. In areas from Newport to Swansea, from Anglesey to Conwy, providers are still managing to move people into accommodation, adopting working practices that allow them to keep socially distant. Despite significant pressures on staffing to relocation to care in some areas, and sickness in other areas, the support has continued for people, and new people have housed as part of these schemes.

3.2.13 The new ways of working have proved difficult, but they are still yielding results. Phone or remote contact through Skype or other digital means are useful, and provide some reassurance of regular contact, but they also are felt to be not as effective in building new relationships in the way that Housing First clients require. Providers of Housing First are committed to making this work, however and are seeing the success of getting >800 people into temporary accommodation as a spring board for working with that cohort using a rapid re-housing or Housing First approach. For example, Salvation Army in Cardiff have been proactive with this opportunity and have already begun building those trusting relationships with an eye on longer-term engagement with Housing First in the future for those individuals. Some providers have reported contact and regular communication with people who have not found it possible to engage with any form of public services for years.

¹⁰ <https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/information-for-healthcare-workers-in-wales/housing-health-social-care-and-support-settings-examples-to-inform-implementation-of-the-updated-infection-prevention-and-control-guidance-covid-19/>

4. The future

4.1 Economic impact and the subsequent effect on homelessness

- 4.1.1 **Economic impact and resulting effects:** COVID-19 is likely to have a significant negative impact on the Welsh economy, and thus result in higher numbers of homeless presentations. Between March 1st and May 12th there were 122,160 individual claimants for Universal Credit in Wales¹¹, a significant increase. The end of the furlough scheme may also have a significant impact on unemployment. The loss of jobs, reduction in income and increasing reliance on the welfare system may result in rent arrears, evictions, and homelessness if people don't have the right support. Our members have told us that a number of people receiving support are losing their jobs. Providers of youth homelessness services have significant concerns about the impact of this pandemic on the employment prospects of young people, particularly those who are care experienced and face other inequalities.
- 4.1.2 The virus will likely have a long term impact on the Welsh Government's finances and in light of the upcoming Senedd elections each party needs to consider its priorities and how these will mitigate any economic fallout from the virus. Significant investment in social housing and multi-disciplinary support services will be essential if Wales is to ensure that homelessness does not increase substantially over the coming years.

4.2 Homelessness, housing and support

- 4.2.1 **Phase Two:** The Welsh Government needs to ensure that the >800 people housed in emergency accommodation are able to transition into permanent housing with access to support, mental health and substance misuse services. The announcement of £20m of funding to transform services and accommodation to facilitate this is very much welcomed and we look forward to working in collaboration with the Welsh Government, our members and partners to deliver this. The process for applying for this funding has been rapid, and put a strain on local authorities and their partners as they have tried to develop their plans. It will be important to ensure that delivery of phase two continues in the collaborative, inclusive, person-centred, multi-agency approach during the phase one crisis response. It must result in sustainable housing-led solutions, based on evidence, which help us to make strides towards the ambition of ending homelessness in Wales. In order to achieve this, we must build on the partnership we have seen in the past few months and use all of the expertise, experience and knowledge that exists across the sector.
- 4.2.2 **Ending homelessness:** In order to end homelessness for good in Wales, housing and support need to be appropriate and accessible to all. While attention has been rightly focused on the crisis, we must not forget about the Homelessness Action Group's report¹² and recommendations. This government, and all political parties in the lead-up to the Senedd elections, should be committed to delivering these recommendations over the coming months and years.
- 4.2.3 **Right to adequate housing:** The impact of COVID-19 has demonstrated that adequate housing is a vital part of the solution to protecting public health. This crisis now provides the Welsh Government the opportunity to re-evaluate the legislation around housing, and incorporate a right to adequate housing for all¹³. This will also help to ensure that nobody has to sleep rough or live in precarious circumstances, thus contributing to the Welsh Government's goal of making homelessness rare, brief and non-recurring¹⁴.

¹¹ <https://committees.parliament.uk/publications/1232/documents/10384/default/>

¹² https://gov.wales/sites/default/files/publications/2020-03/homelessness-action-group-report-march-2020_0.pdf

¹³ <https://www.taipawb.org/wp-content/uploads/2019/06/RightToHousing-Full-ENG.pdf>

¹⁴ <https://gov.wales/sites/default/files/publications/2019-10/homelessness-strategy.pdf>

4.2.4 **Rapid re-housing:** Rapid re-housing is moving people from homelessness into housing without insisting on complex procedures or long waiting times. It recognises that the longer someone is homeless, the more likely they are to stay homeless. Rapid re-housing is on a spectrum, so some people will need a house urgently and then they may need little else. Others may need support whether a low level or high. For those with specific and considerable levels of need, they would adopt the rapid re-housing model known as Housing First. The planned transition towards a rapid re-housing model, as discussed by the Homelessness Action Group earlier this year¹⁵ needs to be prioritised by the Welsh Government to ensure that everyone has access to housing and support, a number of changes will need to be made to implement this:

- Increasing the supply of social and affordable housing stock through continued provision of the Social Housing Grant and increasing the contribution of private developers through enforcement of Section 106¹⁶ of the Town and Country Planning Act 1990.
- Working with social landlords to improve allocations policies and ending evictions into homelessness.
- Working with the private rented sector to increase access to affordable housing, including expanding the private sector leasing scheme.
- Putting empty properties back into use. There are currently 27,000 long term empty private sector residential properties in Wales¹⁷, repurposing these would provide a solution for the current affordable housing stock shortage. Due to the potential long term economic impacts of the pandemic, there may be additional empty buildings that could also be repurposed and incorporated into a rapid re-housing model, such as vacant businesses and residential properties normally used for student housing.
- Removing barriers to access: The crisis has provided an opportunity to revisit some of the barriers to homelessness support including priority need and vulnerability, local connection, as well as protection for renters. We welcome the removal of these barriers but recognise the importance of ensuring adequate housing supply and resources for local authorities to avoid unintended consequences.
- Ensuring people have the appropriate level of multi-agency support to help them to maintain a tenancy, through the provision of tenancy support, Housing First and supported accommodation.

4.2.5 **Future funding:** The £20m funding announced to facilitate the transition of people from emergency accommodation into permanent, sustainable housing solutions will play a big role in helping to facilitate these changes. However, this is only for 2020/21 and we urge the Welsh Government and opposition parties to consider how this can be extended in the next Senedd term to help local authorities and their partners to sustain this work and realise the ambition to end homelessness. The Housing Support Grant will play a significant role in this, and it is critical that it remains ring-fenced in the next Senedd term to ensure that it is directed where it is needed. In addition, we urge political parties to make a commitment to increasing the Housing Support Grant in the next Senedd term, as the sector cannot deliver the ambition of ending homelessness if it continues to face real term cuts in funding¹⁸.

4.2.6 **Psychologically informed approaches:** Across all levels, adopting a psychologically and trauma informed approach to service design and delivery is critical. Many people will likely have experienced new trauma as a result of the crisis, and ensuring that services can support people to deal with these traumas will be important in reducing other social problems such as substance misuse, self-harm and other mental health issues.

¹⁵ <https://www.crisis.org.uk/about-us/the-crisis-blog/wales-action-group-blog-9/>

¹⁶ <https://senedd.wales/research%20documents/gg15-007-planning-section%20106%20agreements/gg15-007.pdf>

¹⁷ <https://senedd.wales/laid%20documents/cr-ld12797/cr-ld12797%20-e.pdf>

¹⁸ https://www.cymorthcymru.org.uk/files/7915/7582/1535/Housing_Matters_report_2019_-_Eng.pdf

- 4.2.7 **Access to mental health services:** Ensuring that people who use services, and the staff who support them, have access to mental health support is therefore incredibly important to help mitigate the additional strains brought on by COVID-19. As we enter recovery and the phase two planning, it is essential that people using services have access to mental health services. We particularly encourage the use of clinical supervision in provider settings to ensure highest quality support to address potential vicarious trauma and the resulting negative impacts of burnout, staff turnover, and sickness levels.
- 4.2.8 **Substance misuse support:** This pandemic has seen substance misuse services work very effectively in partnership with homelessness services and this has had an extremely positive impact. However, there have been concerns that this amount of treatment and support will not be possible once the emergency funding runs out. It is essential that these services are funded to continue this work and ensure that people do not return to the streets. We also support the Homelessness Action Group's recommendations on harm reduction, using evidence based practice to improve health outcomes and reduce homelessness.
- 4.2.9 **Planning for more referrals:** In relation to this, Welsh Government needs to consider how it will manage the increasing number of homelessness and VAWDASV referrals and prepare in advance for future increases due to the impact of COVID-19. When the ban on evictions is lifted and the furlough scheme ends, we are likely to see an increase in presentations to homelessness services. We know that public spending cuts and increases in unemployment are likely, and will lead to homelessness. And we know that there are people who have been trapped in abusive relationships during lockdown, and we are likely to see an increase in VAWDASV referrals once restrictions are eased.
- 4.2.10 **Pay and recognition:** We cannot overstate the scale of the challenge that has faced homelessness, housing and support sector during this pandemic period. Staff have worked incredibly hard in supporting people with complex needs and multiple traumas. This work requires high levels of skills and expertise that must be recognised appropriately. We want staff from the sector to be paid at a fair rate in recognition for their work, but this requires an increase in the funding available through the Housing Support Grant. We would also like more public recognition of the contribution that housing support workers have made, and continue to make, to tackling COVID-19 and its impacts.
- 4.2.11 **Commissioning:** In line with the paragraph above, commissioning should be focused on sustainable services that deliver lasting change. This means ensuring that housing and support providers have the resources they need to deliver high quality, person-centred, psychologically informed services that are not cut short by arbitrary time limits. This includes the time and funding resources for staff support, reflective practice and clinical supervision where appropriate. Flexibility and trust is also important and this has been key to enabling the sector's response to COVID-19. The approach shown by commissioners during this period has been very welcome and enabled organisations to operate with flexibility and overcome the many challenges they have faced. We encourage Welsh Government and local authority commissioners to consider how this can be continued to benefit people using services.
- 4.2.12 As local authorities move towards phase two and consider the transformation of homelessness services, commissioners should work in partnership with housing and support providers to consider how these changes can be delivered in the spirit of partnership. Where possible, these changes should be made within existing contracts, to reduce disruption. Services should be given the chance to adapt to local authorities' new vision to ensure that we do not lose the knowledge, experience and expertise of staff and organisations which have been at the heart of service provision for decades.

- 4.2.13 In light of the continuing challenges posed by COVID-19, we would also like local authorities to consider offering a moratorium on commissioning for a period of time. This will enable providers to meet the continuing pressures related to COVID-19, and to develop long term plans for services for the future. Where services need to change in line with the Phase Two planning, local authorities should work with existing providers to adapt services rather than lose the expertise and dedication of services.
- 4.2.14 **Collaboration:** The collaborative approach which has been taken by local authorities and their partners has been extremely positive and we hope that this will continue into phase two and beyond. The collaborative approach adopted by providers has also allowed for improved coordination and better use of resources across the sector. We would want this to continue into the future, and all partners should make clear what support they may need for this collaborative approach to be sustained in the long term.
- 4.2.15 **Positive changes and learning:** There have been positive changes made in response to COVID-19 and we would want these positives to be incorporated into longer term practices. For instance, we have heard that some people have welcomed the use of digital technology as a means of accessing support, as they felt it had enabled them to be more open by having some level of distance between themselves and the support provider. In addition, we have welcomed the collaborative and inclusive demonstrated by the Welsh Government and local authorities. Everyone needs to maintain responsiveness to future outbreaks and work with the sector on how they can work mitigate and shield against the worst impacts of COVID-19 for those experiencing homelessness and trauma. It is vital that we take the learning from our response to the first outbreak of COVID-19, and ensure this is applied to any future outbreaks or subsequent waves.